

Patent Office Special
Multiple Dependent Claim
Fee Calculation Sheet
(For Use With Form PTO-875)

SERIAL NO.	FILING DATE	
APPLICANT(S)	10/03/636	

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL DEP.						
TOTAL CLAIMS			5			

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TOTAL CLAIMS				